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Atty. Dkt. No. 053466-0299

IE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Akihiro FUNAKOSHI et al.

A PREVENTIVE OR THERAPEUTIC AGENT FOR PANCREATITIS

COMPRISING IL-6 ANTAGONIST AS AN ACTIVE INGREDIENT

Appl. No.: 09/762,550

Filing Date: 02/09/2001

Examiner: Lorraine Spector

Art Unit: 1647

Title:

AMENDMENT TRANSMITTAL

MAIL STOP NON-FEE AMENDMENT Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is a Supplement to Prior Amendment and Reply in the above-identified application.

- [X] Supplement to Prior Reply (1 page).
- [X] English translation abstract of document A6, Takaku et al. (1 page).
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Bin 6 By Res No. 48571

Stephen B. Maebius Attorney for Applicant

Reg. No. 32,792

FOLEY & LARDNER LLP Washington Harbour

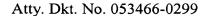
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1647

SUPPLEMENT TO PRIOR REPLY

MAIL STOP NON-FEE AMENDMENT Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

In the Reply filed April 6, 2004, applicants indicated that they were in the process of obtaining an English translation of the relevant part of document A6 (TAKAKU et al.; "The Merck Manual 16th Ed."; Publication on May 1, 1995 3rd printing; pp. 760-766.). A translation of the abstract for this document is enclosed herewith.

Applicants believe that the present application is now in condition for allowance. Favorable reconsideration of the application as amended is respectfully requested.

The Examiner is invited to contact the undersigned by telephone if it is felt that a telephone interview would advance the prosecution of the present application.

Respectfully submitted,

Date 22 April 2004

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For

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Abstract

Acute pancreatitis is a term indicating an acute inflammation observed clinically or histologically (e.g. pancreatitis accompanied by biliary calculus). The term chronic pancreatitis refers to the case of histological changes persisting even after the causative element (usually alcohol) has been removed. Macroscopic pathological changes associated with acute pancreatitis frequently consist of edema or necrosis and hemorrhage. In edemic pancreatitis, the inflammatory reaction is nearly completely localized in the pancreas, and the mortality rate is less than 5%. Treatment of mild edemic pancreatitis consists of fasting until acute inflammatory symptoms subside (namely, cessation of abdominal tenderness and pain, normalization of serum amylase levels, and recovery of stomach emptiness and health), and administration of adequate amounts of intravenous fluids to prevent loss of body fluids and lowering of blood pressure. Removal of liquid and gas in the stomach by insertion of a nasogastric tube is effective in cases when nausea persists or vomiting or ileus is present.